

## Registration Form

## **Drum Majors Leadership Conference**

101 East Capitol Ave., Suite 214 Little Rock, Arkansas 72201



Phone (501) 683-1300 - Toll Free (888) 290-KING (5464) - Fax (501) 683-1310

## Please type or print clearly and fax or mail

	First Name	Middle Initial	Last Name
adge Name:	D.::		
	Print or type your	r name as you want it to c	ippear on your name tag
osition:	Title (Pastor, Pres., Dir., etc.	/	Organization Name
		.,	
Mailing Address:	Number and Street	City	State Zip Code
Telephone No:	()	()	T-Shirt Size:
	Office Phone	Home or Second Ph	one
Fax No:	()	()	()
	Office Fax	Home Fax	Pager
-mail Address:			
Cheek on Money	PAYME	ENT OPTIONS	Hotel accommodations not include
Check of Money	101 East Capitol Ave., Suit	e 214 - Little Rock, AR 7220	nd mail with this registration form to 01.
☐ Credit Card:	[ ] VISA [ ] Ma	asterCard *No On-site	Credit Cards*
G 11 11 1 N	e (As it appears on card)	Credit Card Number	Expiration Date
Cardholder's Nam			
Cardholder's Nam	Auth	orized Signature	
A late fee of \$25 w		nning December16, 2008.	Registration fee will be refunded in e is non-refundable.
A late fee of \$25 w written notification	ill be charged for registration begin	nning December16, 2008.  \$25 of the registration feed for by the participant. He	otel rooms are \$ per night +